

MAY 18 2004

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Deliver to: Art Unit 2822
Firm Name: USPTO
Fax Number: 703-872-9306 Telephone No.: _____
From: Brent E. Vecchia
Date: May 18, 2004 Time: _____
Operator: Krista Mathieson Matter: 042390.P11434
Number of pages including cover sheet: 13
In Re Patent Application of: Achintya Bhowmik, et al.
Application No.: 09/991,337
Filed: November 13, 2001
For: "Electro-Optic Modulator"
Enclosed are the following documents: Attached are the following: the
Transmittal form, the Fee transmittal (in duplicate) and the Office action
Response with a 2 month extension of time request.

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05/01/03

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application No.	09/991,337
		Filing Date	November 13, 2001
		First Named Inventor	Ashutya Bhowmik
		Art Unit	2822
		Examiner Name	Gutierrez, Maria F.
Total Number of Pages in This Submission	12	Attorney Docket Number	42390P11434

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">First Class Certificate of Mailing and the stamped return postcard</div>
<input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)		
<input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/BB/06 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Kenneth J. Cool, Reg. No. 40,570 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	May 18, 2004


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Date	May 18, 2004

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FEE TRANSMITTAL for FY 2004		<small>Complete if Known</small>	
<small>Effective 04/01/2004. Patent fees are subject to annual revision.</small>		Application Number	09/991,337
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		Examiner Name	Guerrero, Maria F.
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<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
TOTAL AMOUNT OF PAYMENT (\$)		420.00	

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)																																																																																																																																																																																														
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SUBMITTED BY		<small>Complete if applicable</small>	
Name (print/type)	Kenneth J. Cool	Registration No. (Attorney/Agent)	40,570
Signature		Telephone	(408) 850-1229
		Date	5-18-04

Based on PTO Form 7 (10-02) as modified by Stanley, Schindler, Taylor & Zabriskie (w/02/02/03).
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		First Named Inventor	Achintya Bhowmik
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Deposit Account Number: 50-0221 Deposit Account Name: Intel Corporation																																													
The Commissioner is authorized to (check all that apply): <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit fee overpayment <input type="checkbox"/> Charge any additional fee(s) or underpayment of fee as required under 37 CFR §§ 1.18, 1.17, 1.16 and 1.20. <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee by the above-identified deposit account																																													
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SUBTOTAL (1)					(3)																																								
2. EXTRA CLAIM FEES																																													
Total Claims: 26 Independent Claims: 6 Multiple Dependent: 20																																													
<table border="1"><thead><tr><th>Fee Code</th><th>Fee (\$)</th><th>Fee Code</th><th>Fee (\$)</th><th>Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>1202</td><td>16</td><td>2202</td><td>0</td><td>Claims in excess of 20</td><td></td></tr><tr><td>1201</td><td>85</td><td>2201</td><td>43</td><td>Independent claims in excess of 3</td><td></td></tr><tr><td>1203</td><td>280</td><td>2203</td><td>145</td><td>Multiple dependent claim, if not paid</td><td></td></tr><tr><td>1204</td><td>85</td><td>2204</td><td>43</td><td>*Multiple independent claims over original patent</td><td></td></tr><tr><td>1205</td><td>16</td><td>2205</td><td>0</td><td>*Relique claims in excess of 20 and over original patent</td><td></td></tr><tr><td colspan="5">SUBTOTAL (2)</td><td>(3)</td></tr></tbody></table>		Fee Code	Fee (\$)	Fee Code	Fee (\$)	Description	Fee Paid	1202	16	2202	0	Claims in excess of 20		1201	85	2201	43	Independent claims in excess of 3		1203	280	2203	145	Multiple dependent claim, if not paid		1204	85	2204	43	*Multiple independent claims over original patent		1205	16	2205	0	*Relique claims in excess of 20 and over original patent		SUBTOTAL (2)					(3)		
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*or number previously paid, if greater. For Reliques, see below																																													
		SUBTOTAL (3) (3) 420.00																																											

SUBMITTED BY		Complete (if applicable)	
Name (print type)	Kenneth J. Cool	Registration No. (attorney/agent)	40-570
Signature		Telephone	(408) 850-1229
		Date	5-18-04

Based on PTO/USB-17 (10-03) as modified by Blaisley, Bockholz, Taylor & Zalman (rev) 02/10/2004.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

MAY 18 2004

OFFICIAL

Docket No.: 42390.P11434

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Appl. No. : 09/991,337 Confirmation No. 3513
Inventor : Achintya Bhowmik
Assignee : Intel Corporation
Filed : Nov. 13, 2001
Art Unit : 2822
Examiner : Guerrero, Maria F.
Title : ELECTRO-OPTIC MODULATOR

OFFICE ACTION RESPONSE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

In response to the Office Action mailed December 19, 2003, reconsideration and further examination of the application is hereby requested. Kindly consider the following:

CERTIFICATE OF TRANSMISSION

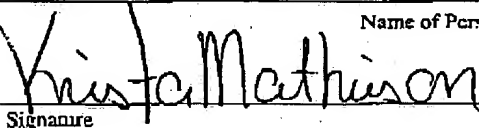
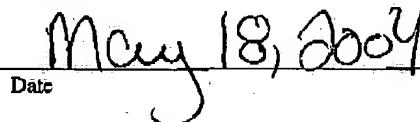
I hereby certify that I am causing the above-referenced correspondence to be facsimile transmitted to the US Patent and Trademark Office on the date shown below:

May 18, 2004

Date of Transmission

Krista A. Mathieson

Name of Person Faxing Correspondence


Signature
Date

Docket No.: 42390.P11434
Appl. No.: 09/991,337

1

Docket No.: 42390.P11434

INTRODUCTORY COMMENTS

Request for an Extension of Time

This Office Action Response is submitted in response to the Office Action dated December 19, 2003 for which the shortened statutory period for response was set to expire on March 19, 2003. It is believed that a two-month extension of time fee is required to extend the period of reply to May 19, 2004. In the event any extension of time fee is required, or any other fee related to this Response is required, please consider this a request therefore. Authorization is hereby given to charge Deposit Account No. 50-0221 for such fee or fees.

Authorization to Charge Deposit Account

Authorization is hereby given to charge Deposit Account No. 50-0221 for any fee or fees related to this Office Action Response.